

PROVIDER BULLETIN

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PHYSICIAN AND DURABLE MEDICAL EQUIPMENT

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RENT-TO-PURCHASE FOR CHEST WALL OSCILLATION DEVICES (E0483EP)

Effective July 1 2008, MO HealthNet will reimburse for chest wall oscillation devices (E0483EP) on a rent-to-purchase basis only. The monthly rental reimbursement rate has been established at \$930.23 (E0483EPRR). If the device continues to be utilized and is medically necessary, it will be considered purchased after the total of all rental payments equals the purchase price \$11,162.76. MO HealthNet will not add an additional percentage to the maximum allowable purchase price when the final rental payment is made.

Any chest wall oscillation device (E0483EP) that has currently been rented by MO HealthNet for twelve or more months is considered purchased effective July 1, 2008. No further rental payments will be made.

If use of the device is discontinued at any time, the provider is expected to stop billing for the device.

CHEST WALL OSCILLATION DEVICE CRITERIA

High frequency chest wall oscillation devices (E0483) are covered for patients who are under the age of 21 and meet either criterion 1 or 2; and criterion 3.

1. There is a diagnosis of cystic fibrosis (277.00, 277.02).
2. There is a diagnosis of bronchiectasis, (011.50-011.56, 494.0, 494.1, 748.61)
 - (a) characterized by daily productive cough for at least 6 continuous months or, frequent (i.e. more than 2/year) exacerbations requiring antibiotic therapy, and
 - (b) confirmed by high resolution or spiral CT scan.

3. There must be well-documented failure of standard treatments to adequately mobilize retained secretions.

PRE-CERTIFICATION REQUIREMENT FOR CHEST WALL OSCILLATION DEVICE

Effective for dates of service on or after July 1, 2008, chest wall oscillation device rental (E0483EPRR) will require pre-certification for all MO HealthNet participants.

Requests must meet medical criteria established by the MO HealthNet Division (MHD) in order to be approved.

CONVERSION OF APPROVED PRIOR AUTHORIZATION REQUESTS

Currently, coverage of a chest wall oscillation device requires an approved prior authorization request for reimbursement of services. Prior authorization requests that are submitted and approved prior to July 1, 2008 will be converted to a pre-certification effective July 1, 2008.

INITIATING PRE-CERTIFICATION REQUESTS FOR DME

Pre-certification of DME is a two-step process. Requests for pre-certification must be initiated by an authorized DME prescriber who writes prescriptions for items covered under the DME Program. Authorized DME prescribers include physicians, podiatrists and nurse practitioners who have a collaborative practice agreement with a physician that allows for prescription of such items. The enrolled DME provider will access the pre-certification initiated by the prescriber to complete the second step of the pre-certification process. All requests must be approved by the MHD. Providers are encouraged to sign up for the MO HealthNet Web tool – [CyberAccessSM](#) – which automates the pre-certification process. To become a CyberAccessSM user, contact the ACS-Heritage help desk at 1-888-581-9797 or 573-632-9797 or send an e-mail to <mailto:MOHealthNetCyberaccess@heritage-info.com>. The CyberAccessSM tool allows each pre-certification to automatically reference the individual participant's claim history, including ICD-9 diagnosis codes and CPT procedure codes. Requests for pre-certification will also be taken by the MO HealthNet call center at 800-392-8030. Requests for pre-certification must meet medical criteria established by the MHD in order to be approved. [Medical criteria](#) is published in [provider bulletins](#) and posted on the [MHD Web siteSM](#) prior to implementation. If a pre-certification request submitted through [CyberAccessSM](#) is denied, providers may click on the box to have a MO HealthNet call center representative contact them. The call center is available Monday through Friday, from 8:00 am to 5:00 pm, excluding state holidays.

PLEASE NOTE: An approved pre-certification request does not guarantee payment. The provider must verify participant eligibility on the date of service using the Interactive Voice Response (IVR) System at (573) 635-8908 or by logging onto the MO HealthNet [Web portal](#). Please continue to monitor the [MHD Web site](#) for updates on this process.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

Provider Communications Hotline
573-751-2896